

Title 17, California Code of Regulations (CCR) §2500, §2593, §2641-2643, and §2800-2812
Reportable Diseases and Conditions*

§ 2500. REPORTING TO THE LOCAL HEALTH AUTHORITY.

- **§ 2500(b)** It shall be the duty of every health care provider, knowing of or in attendance on a case or suspected case of any of the diseases or conditions listed below, to report to the local health officer for the jurisdiction where the patient resides. Where no health care provider is in attendance, any individual having knowledge of a person who is suspected to be suffering from one of the diseases or conditions listed below may make such a report to the local health officer for the jurisdiction where the patient resides.
- **§ 2500(c)** The administrator of each health facility, clinic, or other setting where more than one health care provider may know of a case, a suspected case or an outbreak of disease within the facility shall establish and be responsible for administrative procedures to assure that reports are made to the local officer.
- **§ 2500(a)(14)** "Health care provider" means a physician and surgeon, a veterinarian, a podiatrist, a nurse practitioner, a physician assistant, a registered nurse, a nurse midwife, a school nurse, an infection control practitioner, a medical examiner, a coroner, or a dentist.

URGENCY REPORTING REQUIREMENTS [17 CCR §2500(h)(i)]

☎ = Report immediately by telephone (designated by a ♦ in regulations).

† = Report immediately by telephone when two or more cases or suspected cases of foodborne disease from separate households are suspected to have the same source of illness (designated by a ● in regulations.)

FAX ☎ ☒ = Report by FAX, telephone, or mail within one working day of identification (designated by a + in regulations).

= All other diseases/conditions should be reported by FAX, telephone, or mail within seven calendar days of identification.

REPORTABLE COMMUNICABLE DISEASES §2500(j)(1), §2641-2643

	Acquired Immune Deficiency Syndrome (AIDS) (HIV infection only: see "Human Immunodeficiency Virus",		Pelvic Inflammatory Disease (PID)
FAX ☎ ☒	Amebiasis	FAX ☎ ☒ ☎	Pertussis (Whooping Cough)
	Anthrax		Plague, Human or Animal
	Avian Influenza (human)	FAX ☎ ☒	Poliomyelitis, Paralytic
FAX ☎ ☒	Babesiosis	FAX ☎ ☒	Psittacosis
	Botulism (Infant, Foodborne, Wound)	FAX ☎ ☒	Q Fever
	Brucellosis		Rabies, Human or Animal
FAX ☎ ☒	Campylobacteriosis	FAX ☎ ☒	Relapsing Fever
	Chancroid		Rheumatic Fever, Acute
FAX ☎ ☒	Chickenpox (only hospitalizations and deaths)		Rocky Mountain Spotted Fever
	Chlamydial Infections, including Lymphogranulom Venereum (LGV)		Rubella (German Measles)
	Cholera	FAX ☎ ☒	Rubella Syndrome, Congenital
	Ciguatera Fish Poisoning		Salmonellosis (Other than Typhoid Fever)
	Coccidioidomycosis		Scombroid Fish Poisoning
FAX ☎ ☒	Colorado Tick Fever		Severe Acute Respiratory Syndrome (SARS)
FAX ☎ ☒	Conjunctivitis, Acute Infectious of the Newborn, Specify Etiology	FAX ☎ ☒	Shiga toxin (detected in feces)
	Creutzfeldt-Jakob Disease (CJD) and other Transmissible Spongiform		Shigellosis
	Encephalopathies (TSE)	FAX ☎ ☒	Smallpox (Variola)
FAX ☎ ☒	Cryptosporidiosis	FAX ☎ ☒	Streptococcal Infections (Outbreaks of Any Type and Individual
	Cysticercosis or Taeniasis		Cases in Food Handlers and Dairy Workers Only)
	Dengue	FAX ☎ ☒	Syphilis
	Diarrhea of the Newborn, Outbreak		Tetanus
	Diphtheria		Toxic Shock Syndrome
	Domoic Acid Poisoning (Amnesic Shellfish Poisoning)	FAX ☎ ☒	Toxoplasmosis
	Ehrlichiosis	FAX ☎ ☒	Trichinosis
FAX ☎ ☒	Encephalitis, Specify Etiology: Viral, Bacterial, Fungal, Parasitic		Tuberculosis
	<i>Escherichia coli</i> : shiga toxin producing (STEC) including <i>E. coli</i> O157		Tularemia
† FAX ☎ ☒	Foodborne Disease	FAX ☎ ☒	Typhoid Fever, Cases and Carriers
	Giardiasis		Typhus Fever
	Gonococcal Infections	FAX ☎ ☒	<i>Vibrio</i> Infections
FAX ☎ ☒	<i>Haemophilus influenzae</i> invasive disease (report an incident		Viral Hemorrhagic Fevers (e.g., Crimean-Congo, Ebola, Lassa,
	less than 15 years of age)		and Marburg viruses)
	Hantavirus Infections	FAX ☎ ☒	Water-Associated Disease (e.g., Swimmer's Itch or Hot Tub Rash)
	Hemolytic Uremic Syndrome	FAX ☎ ☒	West Nile Virus (WNV) Infection
	Hepatitis, Viral		Yellow Fever
FAX ☎ ☒	Hepatitis A	FAX ☎ ☒	Yersiniosis
	Hepatitis B (specify acute case or chronic)		OCURRENCE of ANY UNUSUAL DISEASE
	Hepatitis C (specify acute case or chronic)		OUTBREAKS of ANY DISEASE (Including diseases not listed
	Hepatitis D (Delta)		in §2500). Specify if institutional and/or open community.
	Hepatitis, other, acute		
	Human Immunodeficiency Virus (HIV) (§2641-2643)		
	Influenza deaths (report an incident of less than 18 years of age)		
	Kawasaki Syndrome (Mucocutaneous Lymph Node Syndrome)		
	Legionellosis		
	Leprosy (Hansen Disease)		
	Leptospirosis		
FAX ☎ ☒	Listeriosis		
	Lyme Disease		
FAX ☎ ☒	Malaria		
FAX ☎ ☒	Measles (Rubeola)		
FAX ☎ ☒	Meningitis, Specify Etiology: Viral, Bacterial, Fungal, Parasitic		
	Meningococcal Infections		
	Mumps		
	Paralytic Shellfish Poisoning		

REPORTABLE NONCOMMUNICABLE DISEASES AND
CONDITIONS §2800-2812 and §2593(b)

- Disorders Characterized by Lapses of Consciousness (§2800-2812)
- Pesticide-related illness or injury (known or suspected cases)**
- Cancer, including benign and borderline brain tumors (except (1) basal and squamous skin cancer unless occurring on genitalia, and (2) carcinoma in-situ and CIN III of the cervix) (§2593)***

LOCALLY REPORTABLE DISEASES (if Applicable):

* This form is designed for health care providers to report those diseases mandated by Title 17, California Code of Regulations (CCR). Failure to report is a misdemeanor (Health and Safety Code §120295) and is a citable offense under the Medical Board of California Citation and Fine Program (Title 16, CCR, §1364.10 and 1364.11).

** Failure to report is a citable offense and subject to civil penalty (\$250) (Health and Safety Code §105200).

*** The Confidential Physician Cancer Reporting Form may also be used. See Physician Reporting Requirements for Cancer Reporting in CA at www.ccrca.org.